



Marijuana Products Excise Tax Return

SUPPORTING SCHEDULE (c)

(Other Deductions)

INSTRUCTIONS: Prepare a separate schedule for each type of transaction. Attach a copy of each listed invoice or other record satisfactory to the department to the appropriate schedule. Attach the schedule to the City of Dillingham Marijuana Products Tax Return.

Name of Marijuana Licensee	License Number	Month	Year

Business Name of Supplier or Purchaser	Customer, Member or Registrant Number	Invoice Number	Invoice Date	Marijuana Products Wholesale Price
Total Wholesale Price of MP				(1)(c)

*MP - Marijuana Products